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7590 03/14/2005

 Adams Evans P.A.  
 2180 Two Wachovia Center  
 Charlotte, NC 28282  
 06/09/2005 HDEHES52 00000118 010265 10624281

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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Kris Pierce	(Depositor's name)
<i>Kris Pierce</i>	(Signature)
June 9, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/624,281	07/22/2003	Gary D. Bottoms	2308/1B	7460

TITLE OF INVENTION: BODY SUPPORT FOR AUTOMOTIVE MECHANICS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	06/14/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
BROWN, PETER R	3636	297-423110

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the parent front page, list  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Adams Evans P.A.

2. \_\_\_\_\_

3. \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE  
 AUTO PRODUCTS, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)  
 Fort Mill, South Carolina

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

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 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-0265 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature Jonathan M. Hines

Date June 9, 2005

Typed or printed name Jonathan M. Hines

Registration No. 44,764

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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**ADAMS EVANS P.A.**  
INTELLECTUAL PROPERTY ATTORNEYS

2180 Two Wachovia Center  
301 South Tryon Street  
Charlotte, North Carolina 28282-1991  
Telephone: (704) 375-9249  
Facsimile: (704) 375-0729

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W. THAD ADAMS, III  
J. SCOTT EVANS  
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BRANDON C. TREGO  
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SETH L. HUDSON

TO: MAIL STOP ISSUE FEE  
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P.O. Box 1450  
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FROM: Jonathan M. Hines  
Reg. No. 44,764

DATE: June 9, 2005 FAX NO: (703) 746-4000

RE: Our File No. 2308/1B; U.S. Serial No. 10/624,281

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CONFIRMATION COPY YES NO   
TO FOLLOW:

NUMBER OF PAGES Cover + 1

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Also, please confirm receipt of this facsimile. Thank you.

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